

Fill in this information to identify your case:

United States Bankruptcy Court for the:

CENTRAL DISTRICT OF CALIFORNIA

Case number (if known)

Chapter you are filing under:

Chapter 7

Chapter 11

Chapter 12

Chapter 13

Check if this is an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

04/20

The bankruptcy forms use *you* and *Debtor 1* to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use *you* to ask for information from both debtors. For example, if a form asks, “Do you own a car,” the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Identify Yourself

About Debtor 1:

1. Your full name

Write the name that is on your government-issued picture identification (for example, your driver's license or passport).

Bring your picture identification to your meeting with the trustee.

Vali
First name

Middle name

Kermani-Arab
Last name and Suffix (Sr., Jr., II, III)

About Debtor 2 (Spouse Only in a Joint Case):

Pari
First name

Farhang
Middle name

Kermani
Last name and Suffix (Sr., Jr., II, III)

2. All other names you have used in the last 8 years

Include your married or maiden names.

Pari F Kermani

3. Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)

xxx-xx-2812

xxx-xx-0928

Debtor 1 Vali Kermani-Arab
Debtor 2 Pari Farhang Kermani

Case number (if known)

About Debtor 1:

4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years

Include trade names and *doing business as* names

I have not used any business name or EINs.

Business name(s)

EIN

About Debtor 2 (Spouse Only in a Joint Case):

I have not used any business name or EINs.

Business name(s)

EIN

5. Where you live

17331 Martha Street

Encino, CA 91316

Number, Street, City, State & ZIP Code

Los Angeles

County

If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.

PO Box 6904

Woodland Hills, CA 91365

Number, P.O. Box, Street, City, State & ZIP Code

If Debtor 2 lives at a different address:

Number, Street, City, State & ZIP Code

County

If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.

Number, P.O. Box, Street, City, State & ZIP Code

6. Why you are choosing this district to file for bankruptcy

Check one:

Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.

I have another reason. Explain. (See 28 U.S.C. § 1408.)

Check one:

Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.

I have another reason. Explain. (See 28 U.S.C. § 1408.)

Debtor 1 Vali Kermani-Arab
 Debtor 2 Pari Farhang Kermani

Case number (if known) _____

Part 2: Tell the Court About Your Bankruptcy Case

7. The chapter of the Bankruptcy Code you are choosing to file under	<i>Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.</i> <input type="checkbox"/> Chapter 7 <input checked="" type="checkbox"/> Chapter 11 <input type="checkbox"/> Chapter 12 <input type="checkbox"/> Chapter 13																		
<hr/> 8. How you will pay the fee																			
<input checked="" type="checkbox"/> I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address.																			
<input type="checkbox"/> I need to pay the fee in installments. If you choose this option, sign and attach the <i>Application for Individuals to Pay The Filing Fee in Installments</i> (Official Form 103A).																			
<input type="checkbox"/> I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the <i>Application to Have the Chapter 7 Filing Fee Waived</i> (Official Form 103B) and file it with your petition.																			
<hr/> 9. Have you filed for bankruptcy within the last 8 years?																			
<input type="checkbox"/> No.																			
<input checked="" type="checkbox"/> Yes.																			
<table border="0" style="width: 100%;"> <tr> <td style="width: 15%;">District</td> <td style="width: 40%;">Central District of California</td> <td style="width: 15%;">When</td> <td style="width: 20%;">1/16/20</td> <td style="width: 10%;">Case number</td> <td style="width: 15%;">1:20-bk-10111-DS</td> </tr> <tr> <td>District</td> <td>Central District of California; Northern Division</td> <td>When</td> <td>1/16/17</td> <td>Case number</td> <td>9:17-bk-10077-DS</td> </tr> <tr> <td>District</td> <td>See Attachment</td> <td>When</td> <td></td> <td>Case number</td> <td></td> </tr> </table>		District	Central District of California	When	1/16/20	Case number	1:20-bk-10111-DS	District	Central District of California; Northern Division	When	1/16/17	Case number	9:17-bk-10077-DS	District	See Attachment	When		Case number	
District	Central District of California	When	1/16/20	Case number	1:20-bk-10111-DS														
District	Central District of California; Northern Division	When	1/16/17	Case number	9:17-bk-10077-DS														
District	See Attachment	When		Case number															
<hr/> 10. Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?																			
<input checked="" type="checkbox"/> No																			
<input type="checkbox"/> Yes.																			
<table border="0" style="width: 100%;"> <tr> <td style="width: 15%;">Debtor</td> <td style="width: 40%;"></td> <td style="width: 15%;">Relationship to you</td> <td style="width: 20%;"></td> </tr> <tr> <td>District</td> <td>When</td> <td>Case number, if known</td> <td></td> </tr> <tr> <td>Debtor</td> <td></td> <td>Relationship to you</td> <td></td> </tr> <tr> <td>District</td> <td>When</td> <td>Case number, if known</td> <td></td> </tr> </table>		Debtor		Relationship to you		District	When	Case number, if known		Debtor		Relationship to you		District	When	Case number, if known			
Debtor		Relationship to you																	
District	When	Case number, if known																	
Debtor		Relationship to you																	
District	When	Case number, if known																	
<hr/> 11. Do you rent your residence?																			
<input type="checkbox"/> No. Go to line 12.																			
<input checked="" type="checkbox"/> Yes.																			
Has your landlord obtained an eviction judgment against you?																			
<input checked="" type="checkbox"/> No. Go to line 12.																			
<input type="checkbox"/> Yes. Fill out <i>Initial Statement About an Eviction Judgment Against You</i> (Form 101A) and file it with this bankruptcy petition.																			

Debtor 1 Vali Kermani-Arab
Debtor 2 Pari Farhang Kermani

Case number (if known)

Part 3: Report About Any Businesses You Own as a Sole Proprietor

12. Are you a sole proprietor of any full- or part-time business?

No. Go to Part 4.

Yes. Name and location of business

A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.

If you have more than one sole proprietorship, use a separate sheet and attach it to this petition.

Name of business, if any

Number, Street, City, State & ZIP Code

Check the appropriate box to describe your business:

- Health Care Business (as defined in 11 U.S.C. § 101(27A))
- Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))
- Stockbroker (as defined in 11 U.S.C. § 101(53A))
- Commodity Broker (as defined in 11 U.S.C. § 101(6))
- None of the above

13. Are you filing under Chapter 11 of the Bankruptcy Code, and are you a small business debtor or a debtor as defined by 11 U.S.C. § 1182(1)?

For a definition of *small business debtor*, see 11 U.S.C. § 101(51D).

If you are filing under Chapter 11, the court must know whether you are a small business debtor or a debtor choosing to proceed under Subchapter V so that it can set appropriate deadlines. If you indicate that you are a small business debtor or you are choosing to proceed under Subchapter V, you must attach your most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B).

No. I am not filing under Chapter 11.

No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code.

Yes. I am filing under Chapter 11, I am a small business debtor according to the definition in the Bankruptcy Code, and I do not choose to proceed under Subchapter V of Chapter 11.

Yes. I am filing under Chapter 11, I am a debtor according to the definition in § 1182(1) of the Bankruptcy Code, and I choose to proceed under Subchapter V of Chapter 11.

Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention

14. Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?

For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?

No.

Yes.

What is the hazard?

If immediate attention is needed, why is it needed?

Where is the property?

Number, Street, City, State & Zip Code

Debtor 1 Vali Kermani-Arab
Debtor 2 Pari Farhang Kermani

Case number (if known)

Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling

15. Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Debtor 1 Vali Kermani-Arab
Debtor 2 Pari Farhang Kermani

Case number (if known)

Part 6: Answer These Questions for Reporting Purposes

16. What kind of debts do you have?	16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." <input type="checkbox"/> No. Go to line 16b. <input checked="" type="checkbox"/> Yes. Go to line 17.		
	16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. <input type="checkbox"/> No. Go to line 16c. <input type="checkbox"/> Yes. Go to line 17.		
	16c. State the type of debts you owe that are not consumer debts or business debts		
<hr/>			
17. Are you filing under Chapter 7?	<input checked="" type="checkbox"/> No. I am not filing under Chapter 7. Go to line 18. <input type="checkbox"/> Yes. I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available to distribute to unsecured creditors? <input type="checkbox"/> No <input type="checkbox"/> Yes		
<hr/>			
18. How many Creditors do you estimate that you owe?	<input checked="" type="checkbox"/> 1-49 <input type="checkbox"/> 50-99 <input type="checkbox"/> 100-199 <input type="checkbox"/> 200-999	<input type="checkbox"/> 1,000-5,000 <input type="checkbox"/> 5,001-10,000 <input type="checkbox"/> 10,001-25,000	<input type="checkbox"/> 25,001-50,000 <input type="checkbox"/> 50,001-100,000 <input type="checkbox"/> More than 100,000
<hr/>			
19. How much do you estimate your assets to be worth?	<input type="checkbox"/> \$0 - \$50,000 <input type="checkbox"/> \$50,001 - \$100,000 <input type="checkbox"/> \$100,001 - \$500,000 <input checked="" type="checkbox"/> \$500,001 - \$1 million	<input type="checkbox"/> \$1,000,001 - \$10 million <input type="checkbox"/> \$10,000,001 - \$50 million <input type="checkbox"/> \$50,000,001 - \$100 million <input type="checkbox"/> \$100,000,001 - \$500 million	<input type="checkbox"/> \$500,000,001 - \$1 billion <input type="checkbox"/> \$1,000,000,001 - \$10 billion <input type="checkbox"/> \$10,000,000,001 - \$50 billion <input type="checkbox"/> More than \$50 billion
<hr/>			
20. How much do you estimate your liabilities to be?	<input type="checkbox"/> \$0 - \$50,000 <input type="checkbox"/> \$50,001 - \$100,000 <input type="checkbox"/> \$100,001 - \$500,000 <input type="checkbox"/> \$500,001 - \$1 million	<input checked="" type="checkbox"/> \$1,000,001 - \$10 million <input type="checkbox"/> \$10,000,001 - \$50 million <input type="checkbox"/> \$50,000,001 - \$100 million <input type="checkbox"/> \$100,000,001 - \$500 million	<input type="checkbox"/> \$500,000,001 - \$1 billion <input type="checkbox"/> \$1,000,000,001 - \$10 billion <input type="checkbox"/> \$10,000,000,001 - \$50 billion <input type="checkbox"/> More than \$50 billion

Part 7: Sign Below

For you

I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct.

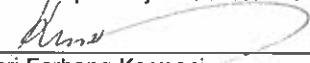
If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11, 12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.

If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.


Vali Kermani-Arab
Signature of Debtor 1


Pari Farhang Kermani
Signature of Debtor 2

Executed on March 23, 2021
MM / DD / YYYY

Executed on March 23, 2021
MM / DD / YYYY

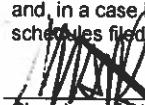
Debtor 1 Vali Kermani-Arab
Debtor 2 Pari Farhang Kermani

Case number (if known)

For your attorney, If you are represented by one

If you are not represented by an attorney, you do not need to file this page.

I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.


Signature of Attorney for Debtor

Date

March 23, 2021

MM / DD / YYYY

Matthew D. Resnik

Printed name

RESNIK HAYES MORADI, LLP.

Firm name

17609 Ventura Blvd.

Ste 314

Encino, CA 91316

Number, Street, City, State & ZIP Code

Contact phone (818) 285-0100

Email address

matt@rhmfirm.com

(SBN 182562) CA

Bar number & State

Debtor 1 Vali Kermani-Arab
Debtor 2 Pari Farhang Kermani

Case number (if known)

Fill in this information to identify your case:

Debtor 1 Vali Kermani-Arab
First Name Middle Name Last Name

Debtor 2 Pari Farhang Kermani
(Spouse if, filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: CENTRAL DISTRICT OF CALIFORNIA

Case number _____
(if known)

Check if this is an
amended filing

FORM 101. VOLUNTARY PETITION

Prior Bankruptcy Cases Filed Attachment

District

Central District of California
Central District of California; Northern Division
Central District of California

Case Number
1:20-bk-10111-DS
9:17-bk-10077-DS
1:13-bk-11500-AA

Date Filed
1/16/20
1/16/17
3/05/13

Fill in this information to identify your case:

Debtor 1	Vali Kermani-Arab		
	First Name	Middle Name	Last Name
Debtor 2	Pari Farhang Kermani		
(Spouse if, filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	CENTRAL DISTRICT OF CALIFORNIA		
Case number (if known)			

Check if this is an amended filing

B 104

For Individual Chapter 11 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims Against You and Are Not Insiders

12/15

If you are an individual filing for bankruptcy under Chapter 11, you must fill out this form. If you are filing under Chapter 7, Chapter 12, or Chapter 13, do not fill out this form. Do not include claims by anyone who is an insider. Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20 percent or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Also, do not include claims by secured creditors unless the unsecured claim resulting from inadequate collateral value places the creditor among the holders of the 20 largest unsecured claims.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information.

Part 1: List the 20 Unsecured Claims in Order from Largest to Smallest. Do Not Include Claims by Insiders.

	Unsecured claim		
1	What is the nature of the claim?	4526 Tenango Drive Woodland Hills, CA 91364	\$ \$870,000.00
All State Realty Group, NV P.O. Box 570871 Tarzana, CA 91357	As of the date you file, the claim is: Check all that apply	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed <input type="checkbox"/> None of the above apply	
	Does the creditor have a lien on your property?	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Total claim (secured and unsecured) \$ \$870,000.00 Value of security: - \$ \$650,000.00 Unsecured claim \$ \$870,000.00	
Contact Contact phone			
2	What is the nature of the claim?	Credit Card	\$ \$10,000.00
Bank of America Business Card P O Box 15796 Wilmington, DE 19886-5796	As of the date you file, the claim is: Check all that apply	<input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <input type="checkbox"/> None of the above apply	
	Does the creditor have a lien on your property?	<input checked="" type="checkbox"/> No	

Debtor 1 Debtor 2	Vali Kermani-Arab Pari Farhang Kermani	Case number (if known)
Contact	<input type="checkbox"/> Yes. Total claim (secured and unsecured) \$ _____ Value of security: _____ Unsecured claim \$ _____	
Contact phone	_____	
3	Capital One P.O. Box 26074 Richmond, VA 23261	What is the nature of the claim? \$ \$1,300.00 As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <input checked="" type="checkbox"/> None of the above apply
	Does the creditor have a lien on your property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Total claim (secured and unsecured) \$ _____ Value of security: _____ Unsecured claim \$ _____	_____
Contact	_____	
Contact phone	_____	
4	Cmre Finance 3075 E Imperial Hwy Brea, CA 92821	What is the nature of the claim? USC Care Medical Group \$ \$550.00 As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <input checked="" type="checkbox"/> None of the above apply
	Does the creditor have a lien on your property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Total claim (secured and unsecured) \$ _____ Value of security: _____ Unsecured claim \$ _____	_____
Contact	_____	
Contact phone	_____	
5	Cmre Finance 3075 E Imperial Hwy Brea, CA 92821	What is the nature of the claim? West Valley Radiology \$ \$187.00 As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <input checked="" type="checkbox"/> None of the above apply
	Does the creditor have a lien on your property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Total claim (secured and unsecured) \$ _____ Value of security: _____ Unsecured claim \$ _____	_____
Contact	_____	
Contact phone	_____	
6	Deutsche Bank National 505 City Parkway West 200	What is the nature of the claim? 4526 Tenango Drive Woodland Hills, CA 91364 \$ \$512,970.75

Debtor 1	Vali Kermani-Arab	Case number (if known)
Debtor 2	Pari Farhang Kermani	
<hr/>		
c/o Specialized Loan Servicing Orange, CA 92868		As of the date you file, the claim is: Check all that apply
		<input type="checkbox"/> Contingent
		<input type="checkbox"/> Unliquidated
		<input type="checkbox"/> Disputed
		<input checked="" type="checkbox"/> None of the above apply
<hr/>		
Does the creditor have a lien on your property?		
<input type="checkbox"/> No		
Contact	Yes. Total claim (secured and unsecured) \$ 1,162,970.75	
Contact phone	Value of security:	- \$ 650,000.00
	Unsecured claim	\$ 512,970.75
<hr/>		
7	Prog Mgt Sys 1521 W. Cameron Ave West Covina, CA 91790	What is the nature of the claim? Keck Hospital Of USC \$ 558.00
As of the date you file, the claim is: Check all that apply		
<input type="checkbox"/> Contingent		
<input type="checkbox"/> Unliquidated		
<input type="checkbox"/> Disputed		
<input checked="" type="checkbox"/> None of the above apply		
<hr/>		
Does the creditor have a lien on your property?		
<input checked="" type="checkbox"/> No		
Contact	Yes. Total claim (secured and unsecured) \$	
Contact phone	Value of security:	- \$
	Unsecured claim	\$
<hr/>		
8	Prog Mgt Sys 1521 W. Cameron Ave West Covina, CA 91790	What is the nature of the claim? Keck Hospital Of USC \$ 432.00
As of the date you file, the claim is: Check all that apply		
<input type="checkbox"/> Contingent		
<input type="checkbox"/> Unliquidated		
<input type="checkbox"/> Disputed		
<input checked="" type="checkbox"/> None of the above apply		
<hr/>		
Does the creditor have a lien on your property?		
<input checked="" type="checkbox"/> No		
Contact	Yes. Total claim (secured and unsecured) \$	
Contact phone	Value of security:	- \$
	Unsecured claim	\$
<hr/>		
9	Sq Fin Svcs 28632 Roadside Drive Agoura Hills, CA 91301	What is the nature of the claim? Cedars Sinai Physicians Inpa \$ 431.00
As of the date you file, the claim is: Check all that apply		
<input type="checkbox"/> Contingent		
<input type="checkbox"/> Unliquidated		
<input type="checkbox"/> Disputed		
<input checked="" type="checkbox"/> None of the above apply		
<hr/>		
Does the creditor have a lien on your property?		
<input checked="" type="checkbox"/> No		

Debtor 1 Debtor 2	Vali Kermani-Arab Pari Farhang Kermani	Case number (if known)
Contact	<input type="checkbox"/> Yes. Total claim (secured and unsecured) \$ _____ Value of security: _____ Unsecured claim \$ _____	
Contact phone	_____	
10	What is the nature of the claim? Seq Fin Svcs 28632 Roadside Drive Agoura Hills, CA 91301	Cedars Sinai Medical Center \$ \$76.00
As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <input checked="" type="checkbox"/> None of the above apply		
Does the creditor have a lien on your property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Total claim (secured and unsecured) \$ _____ Value of security: _____ Unsecured claim \$ _____		
11	What is the nature of the claim? Seq Fin Svcs 28632 Roadside Drive Agoura Hills, CA 91301	Cedars Sinai Medical Center \$ \$1,646.00
As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <input checked="" type="checkbox"/> None of the above apply		
Does the creditor have a lien on your property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Total claim (secured and unsecured) \$ _____ Value of security: _____ Unsecured claim \$ _____		
12	What is the nature of the claim? Wells Fargo Bank P O Box 63491 MACA0143-042 San Francisco, CA 94163	Personal Line of Credit - \$ \$22,000.00 Vali Kermani-Arab
As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <input checked="" type="checkbox"/> None of the above apply		
Does the creditor have a lien on your property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Total claim (secured and unsecured) \$ _____ Value of security: _____ Unsecured claim \$ _____		
13	What is the nature of the claim? Wells Fargo Bank P O Box 63491	Credit Card \$ \$10,000.00

Debtor 1 Vali Kermani-Arab	Debtor 2 Pari Farhang Kermani	Case number (if known)
MACA0143-042 San Francisco, CA 94163		As of the date you file, the claim is: Check all that apply
		<input type="checkbox"/> Contingent
		<input type="checkbox"/> Unliquidated
		<input type="checkbox"/> Disputed
		<input checked="" type="checkbox"/> None of the above apply
Does the creditor have a lien on your property?		
<input checked="" type="checkbox"/> No		
Contact	<input type="checkbox"/> Yes. Total claim (secured and unsecured) \$ _____	
Contact phone	Value of security:	\$ _____
Unsecured claim	\$ _____	

Part 2. Sign Below

Under penalty of perjury, I declare that the information provided in this form is true and correct.

x Vali Kermani-Arab
Vali Kermani-Arab
Signature of Debtor 1

x Pari Farhang Kermani
Pari Farhang Kermani
Signature of Debtor 2

Date March 23, 2021

Date March 23, 2021

**United States Bankruptcy Court
Central District of California**

In re Vali Kermani-Arab
Pari Farhang Kermani

Debtor(s)

Case No.
Chapter

11

LIST OF EQUITY SECURITY HOLDERS

Following is the list of the Debtor's equity security holders which is prepared in accordance with rule 1007(a)(3) for filing in this Chapter 11 Case

Name and last known address or place of business of holder	Security Class	Number of Securities	Kind of Interest
None			

DECLARATION UNDER PENALTY OF PERJURY ON BEHALF OF CORPORATION OR PARTNERSHIP

I, the of the named as the debtor in this case, declare under penalty of perjury that I have read the foregoing List of Equity Security Holders and that it is true and correct to the best of my information and belief.

Date March 23, 2021

Signature Vali Kermani-Arab
Vali Kermani-Arab

*Penalty for making a false statement of concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both.
18 U.S.C. §§ 152 and 3571.*

STATEMENT OF RELATED CASES
INFORMATION REQUIRED BY LBR 1015-2
UNITED STATES BANKRUPTCY COURT, CENTRAL DISTRICT OF CALIFORNIA

1. A petition under the Bankruptcy Act of 1898 or the Bankruptcy Reform Act of 1978 has previously been filed by or against the debtor, his/her spouse, his or her current or former domestic partner, an affiliate of the debtor, any copartnership or joint venture of which debtor is or formerly was a general or limited partner, or member, or any corporation of which the debtor is a director, officer, or person in control, as follows: (Set forth the complete number and title of each such prior proceeding, date filed, nature thereof, the Bankruptcy Judge and court to whom assigned, whether still pending and, if not, the disposition thereof. If none, so indicate. Also, list any real property included in Schedule A/B that was filed with any such prior proceeding(s).)

Pari Farhang Kermani 1:13-bk-11500-AA Chapter 13 Filed 03/05/2013 Dismissed 6/25/2013;

Pari F Kermani 9:17-bk-10077-DS Chapter 11 filed on 01/16/2017 dismissed on 02/13/2019;

Pari F Kermani 1:20-bk-10111-DS Chapter 11 filed on 01/16/2020 dismissed on 07/22/2020

2. (If petitioner is a partnership or joint venture) A petition under the Bankruptcy Act of 1898 or the Bankruptcy Reform Act of 1978 has previously been filed by or against the debtor or an affiliate of the debtor, or a general partner in the debtor, a relative of the general partner, general partner of, or person in control of the debtor, partnership in which the debtor is a general partner, general partner of the debtor, or person in control of the debtor as follows: (Set forth the complete number and title of each such prior proceeding, date filed, nature of the proceeding, the Bankruptcy Judge and court to whom assigned, whether still pending and, if not, the disposition thereof. If none, so indicate. Also, list any real property included in Schedule A/B that was filed with any such prior proceeding(s).)

None

3. (If petitioner is a corporation) A petition under the Bankruptcy Act of 1898 or the Bankruptcy Reform Act of 1978 has previously been filed by or against the debtor, or any of its affiliates or subsidiaries, a director of the debtor, an officer of the debtor, a person in control of the debtor, a partnership in which the debtor is general partner, a general partner of the debtor, a relative of the general partner, director, officer, or person in control of the debtor, or any persons, firms or corporations owning 20% or more of its voting stock as follows: (Set forth the complete number and title of each such prior proceeding, date filed, nature of proceeding, the Bankruptcy Judge and court to whom assigned, whether still pending, and if not, the disposition thereof. If none, so indicate. Also, list any real property included in Schedule A/B that was filed with any such prior proceeding(s).)

None

4. (If petitioner is an individual) A petition under the Bankruptcy Reform Act of 1978, including amendments thereof, has been filed by or against the debtor within the last 180 days: (Set forth the complete number and title of each such prior proceeding, date filed, nature of proceeding, the Bankruptcy Judge and court to whom assigned, whether still pending, and if not, the disposition thereof. If none, so indicate. Also, list any real property included in Schedule A/B that was filed with any such prior proceeding(s).)

See No. 1

I declare, under penalty of perjury, that the foregoing is true and correct.

Executed at Encino, California.

Date: 3/23/2021



Vali Kermani-Arab
Signature of Debtor 1


Pari Farhang Kermani
Signature of Debtor 2

United States Bankruptcy Court
Central District of California

In re Vali Kermani-Arab
Pari Farhang Kermani

Debtor(s)

Case No.

Chapter 11

DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR(S)

1. Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:

For legal services, I have agreed to accept	\$ <u>10,000.00</u>
Prior to the filing of this statement I have received	\$ <u>10,000.00</u>
Balance Due	\$ <u>0.00</u>

2. \$ 1,738.00 of the filing fee has been paid.

3. The source of the compensation paid to me was:

Debtor Other (specify):

4. The source of compensation to be paid to me is:

Debtor Other (specify):

5. I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.

I have agreed to share the above-disclosed compensation with a person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation is attached.

6. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:

- a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;
- b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required;
- c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;
- d. [Other provisions as needed]

7. By agreement with the debtor(s), the above-disclosed fee does not include the following service:

CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

March 23, 2021

Date



Matthew D. Resnik

Signature of Attorney

RESNIK HAYES MORADI, LLP.

17609 Ventura Blvd.

Ste 314

Encino, CA 91316

(818) 285-0100 Fax: (818) 855-7013

matt@rhmfir.com

Name of law firm

<p>Attorney or Party Name, Address, Telephone & FAX Nos., State Bar No. & Email Address Matthew D. Resnik 17609 Ventura Blvd Ste 314 Encino, CA 91316 (818) 285-0100 Fax: (818) 855-7013 California State Bar Number: (SBN 182562) CA matt@rhmfirm.com</p> <p><input type="checkbox"/> Debtor(s) appearing without an attorney <input checked="" type="checkbox"/> Attorney for Debtor</p>	FOR COURT USE ONLY
<p>UNITED STATES BANKRUPTCY COURT CENTRAL DISTRICT OF CALIFORNIA</p>	
<p>In re:</p> <p>Vali Kermani-Arab Pari Farhang Kermani</p> <p style="text-align: right;">Debtor(s).</p>	<p>CASE NO.: CHAPTER: 11</p> <p style="text-align: center;">VERIFICATION OF MASTER MAILING LIST OF CREDITORS [LBR 1007-1(a)]</p>

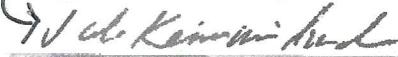
Pursuant to LBR 1007-1(a), the Debtor, or the Debtor's attorney if applicable, certifies under penalty of perjury that the master mailing list of creditors filed in this bankruptcy case, consisting of 3 sheet(s) is complete, correct, and consistent with the Debtor's schedules and I/we assume all responsibility for errors and omissions.

Date: March 23, 2021

Signature of Debtor 1



Signature of Debtor 2 (joint debtor) (if applicable)



Signature of Attorney for Debtor (if applicable)

Date: March 23, 2021

Date: March 23, 2021

Date: March 23, 2021

Vali Kermani-Arab
PO Box 6904
Woodland Hills, CA 91365

Pari Farhang Kermani
PO Box 6904
Woodland Hills, CA 91365

Matthew D. Resnik
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All State Realty Group, NV
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P O Box 15796
Wilmington, DE 19886-5796

Bk Of America
Po Box 982238
El Paso, TX 79998

Capital One
P.O. Box 26074
Richmond, VA 23261

Cmre Finance
3075 E Imperial Hwy
Brea, CA 92821

Deutsche Bank National
505 City Parkway West 200
c/o Specialized Loan Servicing
Orange, CA 92868

Dsnb Macys
Po Box 8218
Mason, OH 45040

Franchise Tax Board
Attn: Bankruptcy Unit
P.O. Box 2952
Sacramento, CA 95812-2952

Internal Revenue
Department of the Treasury
Ogden, UT 84201-0005

Los Angeles County Tax Collector
PO Box 54110
Los Angeles, CA 90054-0110

Macysdsnb
Po Box 8218
Mason, OH 45040

Prog Mgt Sys
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West Covina, CA 91790

Seq Fin Svcs
28632 Roadside Drive
Agoura Hills, CA 91301

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Orlando, FL 32896

Syncb/mens
Po Box 965005
Orlando, FL 32896

Syncb/toysrus
Po Box 965005
Orlando, FL 32896

Wells Fargo Bank
P O Box 63491
MACA0143-042
San Francisco, CA 94163